

2005 DRAFTING REQUEST

Bill

Received: **11/18/2004**

Received By: **csundber**

Wanted: **11/23/2004**

Identical to LRB:

For: **Steve Wieckert (608) 266-3070**

By/Representing: **Scott Becher**

This file may be shown to any legislator: **NO**

Drafter: **csundber**

May Contact:

Addl. Drafters:

Subject: **Occupational Reg. - prof lic**

Extra Copies:

Submit via email: **YES**

Requester's email: **Rep.Wieckert@legis.state.wi.us**

Carbon copy (CC:) to:

Pre Topic:

No specific pre topic given

Topic:

Printing prescription purpose on prescription label

Instructions:

Redraft 2003 AB 689

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	csundber 12/17/2004	chanaman 12/21/2004		_____			
/1			rschluet 12/22/2004	_____	sbasford 12/22/2004 mbarman 12/22/2004	lnorthro 03/02/2005	

FE Sent For:

→ Not Needed

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re-submitted
via e-mail only

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FE Sent For:

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14: 12/17/04
5
2003 ASSEMBLY BILL 689

December 5, 2003 - Introduced by Representatives WIECKERT, LOTHIAN, AINSWORTH, OWENS, SERATTI, HINES, OLSEN, HAHN, GUNDERSON, ALBERS, LADWIG, KRAWCZYK, TOWNSEND, OTT, J. LEHMAN, MORRIS, TAYLOR and VAN ROY, cosponsored by Senators BROWN, WIRCH, ROESSLER and STEPP. Referred to Committee on Health.

- regen
- 1 AN ACT *to amend* 450.11 (1); and *to create* 450.11 (4) (a) 8. and 450.11 (4m) of
2 the statutes; **relating to:** prescription drug labels.

Analysis by the Legislative Reference Bureau

Current law requires prescription drug labels to specify certain information, including the name and address of the practitioner who prescribed the drug, the date on which the prescription was dispensed, the name of the patient, and directions for the use of the drug product or device.

This bill requires prescription drug labels to specify, in addition to the above information, the symptom or purpose for which the drug is being prescribed if the patient wants the symptom or purpose to appear on the label. The practitioner who prescribes the drug must ask the patient if the patient wants the symptom or purpose to appear on the label. If the patient wants that information on the label, the practitioner must add that information to the prescription order and the pharmacist must include that information on the prescription drug label.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

- 3 SECTION 1. 450.11 (1) of the statutes is amended to read:
4 450.11 (1) DISPENSING. No person may dispense any prescribed drug or device
5 except upon the prescription order of a practitioner. All prescription orders shall

ASSEMBLY BILL 689**SECTION 1**

1 specify the date of issue, the name and address of the patient, the name and address
2 of the practitioner, the name and quantity of the drug product or device prescribed,
3 directions for the use of the drug product or device, the symptom or purpose for which
4 the drug is being prescribed if required under sub. (4) (a) 8. and, if the order is
5 written by the practitioner, the signature of the practitioner. Any oral prescription
6 order shall be immediately reduced to writing by the pharmacist and filed according
7 to sub. (2).

8 **SECTION 2.** 450.11 (4) (a) 8. of the statutes is created to read:

9 450.11 (4) (a) 8. The symptom or purpose for which the drug is being prescribed
10 if the prescription order specifies the symptom or purpose under sub. (4m).

11 **SECTION 3.** 450.11 (4m) of the statutes is created to read:

12 450.11 (4m) LABEL OPTIONS. Before making a prescription order, a practitioner
13 shall ask the patient if the patient wants the symptom or purpose for the prescription
14 to be disclosed on the label. If the patient wants the symptom or purpose for the
15 prescription to be disclosed on the label, the practitioner shall specify the symptom
16 or purpose in the prescription order.

17 **SECTION 4. Initial applicability.**

18 (1) The treatment of section 450.11 (4m) of the statutes first applies to
19 prescription orders that are made on the effective day of this subsection.

20 **SECTION 5. Effective date.**

21 (1) This act takes effect on the first day of the 6th month beginning after
22 publication.

23 (END)

Northrop, Lori

From: Becher, Scott
Sent: Wednesday, March 02, 2005 9:40 AM
To: Northrop, Lori
Subject: FW: Prescription Labeling To Reduce Medical Errors – Co-sponsorship LRB 0910/1

Please jacket this bil...

Scott

-----Original Message-----

From: Cekosh, Nick
Sent: Wednesday, March 02, 2005 9:37 AM
To: *Legislative Assembly Republicans; *Legislative Assembly Democrats; *Legislative Senate Republicans; *Legislative Senate Democrats
Subject: Prescription Labeling To Reduce Medical Errors - Co-sponsorship LRB 0910/1

To: All Legislators

From: Representative Steve Wieckert

Date: March 2, 2005

Re: Prescription Labeling To Reduce Medical Errors - Co-sponsorship LRB 0910/1

This legislation would require a doctor to authorize that the prescription label contains several words indicating what this prescription is for. For example, "for asthma" or "for high blood pressure" or "for arthritis" or "for reducing infection." This requirement would be at the option of the patient, and the doctor or pharmacist would be required to put this information on the label at the patient's request.

One of the biggest challenges facing Wisconsin today is the high cost of health care. One way we can improve both the quality of healthcare and reduce the cost is by providing the consumer with more information and involvement in their own health care needs.

"Medical errors" is a term used when mistakes are made in providing care to patients. It could be a mistake during a surgery, or a mistake in the diagnosis or treatment of a disease or in the mistaken use of a prescription drug (medication error).

Many medication errors are caused because of confusion on the part of the consumer who does not understand the technical names on their prescription label. Therefore, they often refer to their medications as "the blue pill," or "the square pill," or "the one with the logo in the middle," etc.

Often, people that have more than one prescription get confused on which prescription is for what ailment. If they are being treated for both high blood pressure and cholesterol and the doctor tells the patient to stop taking the medicine for cholesterol, the patient may become confused and stop taking the medication for high blood pressure, and a medical error results that could even mean the death of the patient.

This concept has the support of The Wisconsin Patient Safety Institute, whose members include:

- AARP
- Medical College of Wisconsin
- Pharmacy Society of Wisconsin